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## BIB DATA SHEET

CONFIRMATION NO. 9501

| SERIAL NUMBER                                                                                                                                                                                                                                                            | FILING or 371(c)<br>DATE                                                                                          | CLASS                                                    | GROUP ART UNIT         | ATTORNEY DOCKET NO.                                          |                    |                         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|------------------------|--------------------------------------------------------------|--------------------|-------------------------|
| 10/790,496                                                                                                                                                                                                                                                               | 03/01/2004<br>RULE                                                                                                | 370                                                      | 2619                   | 50T5713.02                                                   |                    |                         |
| <b>APPLICANTS</b><br>Ryuichi Iwamura, San Diego, CA;<br><b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/501,625 09/09/2003<br><b>** FOREIGN APPLICATIONS *****</b><br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>05/19/2004          |                                                                                                                   |                                                          |                        |                                                              |                    |                         |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Verified and /BOB A PHUNKULH/<br>Acknowledged Examiner's Signature |                                                                                                                   | <input type="checkbox"/> Met after Allowance<br>Initials | STATE OR COUNTRY<br>CA | SHEETS DRAWINGS<br>6                                         | TOTAL CLAIMS<br>25 | INDEPENDENT CLAIMS<br>3 |
| <b>ADDRESS</b><br>ROGITZ & ASSOCIATES<br>750 B STREET<br>SUITE 3120<br>SAN DIEGO, CA 92101<br>UNITED STATES                                                                                                                                                              |                                                                                                                   |                                                          |                        |                                                              |                    |                         |
| <b>TITLE</b><br>System and method for multi-link communication in home network                                                                                                                                                                                           |                                                                                                                   |                                                          |                        |                                                              |                    |                         |
| <b>FILING FEE RECEIVED</b><br>860                                                                                                                                                                                                                                        | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                                          |                        | <input type="checkbox"/> All Fees                            |                    |                         |
|                                                                                                                                                                                                                                                                          |                                                                                                                   |                                                          |                        | <input type="checkbox"/> 1.16 Fees (Filing)                  |                    |                         |
|                                                                                                                                                                                                                                                                          |                                                                                                                   |                                                          |                        | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |                    |                         |
|                                                                                                                                                                                                                                                                          |                                                                                                                   |                                                          |                        | <input type="checkbox"/> 1.18 Fees (Issue)                   |                    |                         |
|                                                                                                                                                                                                                                                                          |                                                                                                                   |                                                          |                        | <input type="checkbox"/> Other _____                         |                    |                         |
|                                                                                                                                                                                                                                                                          |                                                                                                                   | <input type="checkbox"/> Credit                          |                        |                                                              |                    |                         |